

## THESIS/RESEARCH PROJECT COMPLETION/CONSULTATION FORM

Registration Number: \_\_\_\_\_ Name: \_\_\_\_\_ Program: \_\_\_\_\_

Credit Hours: \_\_\_\_\_ Course: \_\_\_\_\_ Specialization: \_\_\_\_\_

Topic of Study: \_\_\_\_\_ Name of Advisor: \_\_\_\_\_

Tentative Letter Grade Assigned: \_\_\_\_\_ (A+, A, A-, B+, B, B-, C+, C, C-, D, Fail) Semester: \_\_\_\_\_

<b>Progress &amp; Meeting Record</b>						
No.	Date	Venue	Activity	Progress & Remarks	Advisor's Signature	Advisee's Signature
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

NOTE:

- Please complete the 10-week meeting requirement.
- Final grade will be assigned after final presentation.
- Please submit this form with copy of final reports in proper format at the end of the semester.
- Two hard bound and one soft copy on CD.

Comments: \_\_\_\_\_ Final Letter Grade Assigned: \_\_\_\_\_

Checked by: Research Coordinator \_\_\_\_\_

-----Do not write beyond this section-----

<b>Advisor</b>	<b>Program Manager</b>	<b>Records Controller</b>
Remarks:  _____  _____  <div style="text-align: right; margin-top: 20px;">_____ Signature &amp; Date</div>	Remarks:  _____  _____  <div style="text-align: right; margin-top: 20px;">_____ Signature &amp; Date</div>	Endorsement Form _____ Application Form _____ Two hard bound copies _____ One soft copy _____ Plagiarism Report _____ Supervisor Evaluation _____ Evaluation & Minutes of Meeting _____  <div style="text-align: right; margin-top: 20px;">_____ Signature &amp; Date</div>